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CONFIRMATION NO. 4776

Bib Data Sheet

SERIAL NUMBER 09/699,963	FILING DATE 11/05/1999 RULE	CLASS 701	GROUP ART UNIT 3663	ATTORNEY DOCKET NO. 99270
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APPLICANTS
 Angela Masson, Miami Beach, FL;

** CONTINUING DATA ***** *None ftc*

** FOREIGN APPLICATIONS ***** *None ftc*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 12/03/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 7	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 18 3
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35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after
 Verified and Acknowledged *Signature* *Initials*

ADDRESS
 Angela Masson
 P O Box 190540
 Miami Beach, FL
 33119

TITLE
 Electronic kit bag

FILING FEE RECEIVED 1065	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 4776

SERIAL NUMBER 09/699,963	FILING DATE 11/05/1999 RULE	CLASS 361	GROUP ART UNIT 2835	ATTORNEY DOCKET NO. 99270	
APPLICANTS Angela Masson, Miami Beach, FL;					
** CONTINUING DATA ***** <i>AK</i>					
** FOREIGN APPLICATIONS ***** <i>AK</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/03/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Angela Masson</i> Examiner's Signature Initials		STATE OR COUNTRY FL	SHEETS DRAWING 7	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 19
ADDRESS Angela Masson P O Box 190540 Miami Beach ,FL 33119					
TITLE Electronic kit bag					
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